

3 1761 11969843 9

Government
Publications

COMMISSION OF INQUIRY INTO THE
USE OF DRUGS AND BANNED PRACTICES
INTENDED TO INCREASE ATHLETIC PERFORMANCE

B E F O R E:

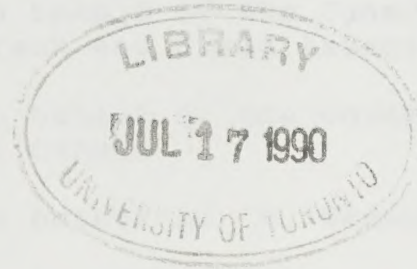
THE HONOURABLE MR. JUSTICE CHARLES LEONARD DUBIN

HEARING HELD AT 1235 BAY STREET,
2nd FLOOR, TORONTO, ONTARIO,
ON MONDAY, JUNE 19, 1989

VOLUME 61

NETWORK COURT REPORTING LTD.

COMMISSION OF INQUIRY INTO THE
USE OF DRUGS AND BANNED PRACTICES
INTENDED TO INCREASE ATHLETIC PERFORMANCE




B E F O R E:

THE HONOURABLE MR. JUSTICE CHARLES LEONARD DUBIN

HEARING HELD AT 1235 BAY STREET,
2nd FLOOR, TORONTO, ONTARIO,
ON MONDAY, JUNE 19, 1989

VOLUME 61



Digitized by the Internet Archive
in 2023 with funding from
University of Toronto

<https://archive.org/details/31761119698439>

(i)

C O U N S E L:

R. ARMSTRONG, Q.C.
Ms. K. CHOWN
M. PROUX, Q.C.

on behalf of the
Commission

R. BOURQUE

on behalf of the Canadian
Track and Field Association

J. DEPENCIER

on behalf of the Government
of Canada

J. FREEDMAN

on behalf of W. Wedmann

A. PRATT

on behalf of Charles
Francis

(ii)

I N D E X O F W I T N E S S E S

NAME

PAGE NO.

ROBERT BENJAMIN KERR, M.D.

Examined by Mr. Armstrong

10414

(iii)

I N D E X O F E X H I B I T S

EXHIBIT NO.	DESCRIPTION	PAGE NO.
203	Curriculum Vitae of Robert Benjamin Kerr, M.D.	10416
204	Letter dated March 1, 1985, from Dr. R.B. Kerr to Dr. J.A. Lombardo.	10445

---Upon resuming

THE COMMISSIONER: Mr. Armstrong?

MR. ARMSTRONG: Thank you, Mr. Commissioner.

5 Our next witness is Dr. Robert Kerr and he's present and
ready to be sworn.

THE COMMISSIONER: Yes. Mr. Kerr?

ROBERT B. KERR: Sworn

10

THE COMMISSIONER: Mr. Armstrong?

EXAMINATION BY MR. ARMSTRONG:

15 Q. Yes. Dr. Kerr, you are from San
Gabriel, California which is a community just outside of
Los Angeles, is that correct?

A. That's correct.

20 Q. And you have provided to me, for the
assistance of the Commissioner and others, a copy of your
curriculum vitae which you have in front of you and I have
placed a copy before you, sir, and I think it would be
helpful if this were marked as an exhibit, please?

THE COMMISSIONER: Thank you.

THE REGISTRAR: 203.

25

---EXHIBIT NO. 203: Curriculum Vitae of Robert Benjamin
Kerr

MR. ARMSTRONG:

5 Q. I just wanted to take a moment, Dr.
Kerr, with you to review some of the highlights of your
C.V..

10 Your undergraduate training is in California
at San Bernardino Valley College which I understand is a
junior college. Then the University of Redlands and the
University California, Riverside Campus, which would
account for your pre-medical academic training, is that
so?

A. That's correct.

15 Q. And then your medical school training
and MD degree were obtained from the University of
California, Irvine campus?

A. That's correct.

20 Q. And you did post -- and you graduated
with your MD in 1964?

A. That's right.

25 Q. And then you told me that your -- as
indicated here, your post-graduate training, your
internship, was at the Los Angeles County Hospital system
which presumably must be a series of hospitals that you

would have circulated through, is that so?

A. On the main hospital grounds there are a number of hospitals quite large, one of the largest in the country.

5 Q. And then you began to practice medicine in July 1965 starting as a family practitioner in the Alhambra Community which is a community, I understand, next door to San Gabriel?

A. That's correct.

10 Q. All right. And I'm going to come back to your practice in a moment but just looking at some of your society and professional associations; you're a member of the American Medical Association, member of the American College of Sports Medicine, a member of the
15 British Society for Sport and Medicine, medical advisor to the National Education Centre.

You are a professional member of the American Running and Fitness Association.

20 Your hospital affiliations are at the -- as a staff member at the Alhambra Community Hospital and you still have that affiliation?

A. Yes.

Q. All right. And then on page 2, listed under publications, you of course are the author of the
25 well known book entitled, "The Practical Use of Anabolic

Steroids With Athletes," and then there is a list of other contributions and speaking engagements that you have been involved in -- not a list but an indication that you've been a contributor to lay and scientific journals and a speaker at many lay and scientific assemblies.

Now, your medical practice, as you indicated a moment ago, began in Alhambra in 1965 and for many years now has been located in San Gabriel?

A. I moved closer to home.

Q. Right. And you started out as a family medicine practitioner but I understand it wasn't long before part of your practice became -- pointed in the direction of sports medicine. Could you just take a minute to tell us how that developed?

A. Yes, I played Rugby football and it necessitated my training at a gym, weight training gym, and I was approached by athletes from the Rugby teams and and the gym itself asking for help with minor injuries.

THE COMMISSIONER: Is that in English Rugby?

THE WITNESS: Yes, Rugby Union.

THE COMMISSIONER: Right.

MR. ARMSTRONG:

Q. All right.

A. And I think it's like everything else,

you learn ways of doing things, treating certain injuries and it escalated from there.

Q. All right. And as I understand it, your practice soon -- in this -- from these beginnings
5 developed in such a way that you became sort of 50 per cent general family medicine but 50 per cent sports medicine directed to looking after the various injuries and ailments that athletes have?

A. Well, probably wasn't 50 per cent
10 sports medicine until much later.

Q. All right. But by, say, the late '70's, early '80's?

A. Oh, absolutely.

Q. It was clearly in the 50 per cent
15 range. That's I suppose early '70's, would it be?

A. Certainly early to middle '70's, yes.

Q. And, indeed, I understand today your practice roughly divides between a general family practice and a sports medicine practice or -- roughly on a 50/50
20 line?

A. That's about correct, yes.

Q. All right. Now, Dr. Kerr, obviously at some point you developed a professional knowledge of and an interest in anabolic steroids.

25 Can you take a moment, please, just to tell

us how that interest developed and what direction it took?

A. I believe it was in the latter 60's and I was rather appalled, especially from the people that I knew at the gym, who were buying black market steroids. Some were going to Mexico at the time but it was primarily buying it from black market dealers who frequented the gym. There was no one on the gym side but that's usually the case.

It was also true with the Rugby team and other Rugby teams themselves and it seemed, to me, quite a bizarre way to take medication. Even in those days there were fake anabolic drugs being sold and the prices these fellows was paying were sky high and there was certainly no guarantee what they were getting was the real thing.

There was no education, no warnings, no nothing from the black market dealer.

Q. Right.

A. When I reported black market dealers in those days, in California and I believe elsewhere, it was simply a misdemeanor. And so police agencies, state medical board, state pharmacy board, in most cases I received no reply to my letters. And when I did, the response was, well, we're dealing with heroin traffic, and I think cocaine in those days, too, and steroids is pretty far down on our list. We just don't have the manpower

and, frankly, we're not really that interested.

One police officer in Orange County, with the sheriff's department, was training at a gym in Fountain Valley, California, and he told me that there were youngsters coming in to get injections of testosterone from someone working at the gym who were so young that they didn't have a driver's licence, their parents had to drive them.

And I said, well, why can't you report this and put this guy out of business? He said, well, I've spoken to people at Orange County Sheriff and they said, we just don't have the manpower and we're just not interested.

Q. I see.

A. So, it seemed to me, and especially after talking to a few doctors at the time, that perhaps medical doctors should try to persuade these athletes to not deal with black market illegal drug dealers and to try to put some sense into what was going on.

Now, in those days, even the athletes who are buying from the black market were generally taking small doses of medication, at least in comparison to what's going on today.

But, the drug dealer was anxious to sell whatever he could and so he usually talked them into

somewhat large doses which, as I say, looking back now, in comparison to today, they were rather small in comparison.

So, at the time, it seemed like a good idea in both my mind and the minds of other doctors to whom I had spoken that if we could direct these people, give them some idea of what this drug was all about, this type of drug, and let them decide if they still wanted to take it and perhaps do it through legitimate pharmacies and have tighter controls over what they were taking, perform certain lab tests to perhaps rule out the possibility of side effects that could show up.

Q. All right. And, indeed, you have said in your book, and I'm just going to quote a passage from it and ask you to comment on it;

"Whether you or I agree with people taking anabolic steroids, it really doesn't matter. The important factor is that they're going to take them anyway.

My feeling is that athletes are going to use these drugs whether you or I or the International Olympic Committee or the NCAA, or whoever, likes it or not. So if they're going to take these drugs anyway then at least I can play a role in guiding them in the right direction."

And I take it that was part of your rationale at that time?

A. Yes. I've heard this echoed by a number of doctors over the years, throughout the country. In fact, a fellow from Indiannapolis told me the same thing, in the same words, just a few weeks ago.

So, basically, that was it. But, at that time, I felt that the athletes could be trusted to some degree.

Q. And we're going to hear in a few minutes than indeed you came to the conclusion that regrettably you couldn't certainly trust everybody and that led you away from being involved in steroids but we'll come to that in a kind of chronological way, if we can.

Let me just ask you this; what is the time frame we're talking about, Dr. Kerr? You mentioned that you became aware, in the late 60's, of the use of these drugs on a kind of ad hoc non-medical basis and so on.

When did you actually become involved as a practitioner in the sense of both advising and prescribing anabolic steroids? What would the time frame be?

A. I believe it was in the later 60's, yes, in a very limited scale at that time.

Q. All right. Now, obviously then, you

did become involved in advising athletes and in prescribing drugs on -- anabolic steroids on a medical basis, I take it?

A. That's correct.

5 Q. All right. And I think that we have pretty much, in the course of our evidence here, laid to rest any question about whether or not these drugs are indeed of some assistance but we're going to see what the scope of your practice is in a moment or two, but -- what
10 your practice was in a moment or two.

But let me just ask you this; when you got into the practice of advising and prescribing anabolic steroids and you began to see what effect, if any, they had on your patients, did you come to any conclusion as to
15 whether or not they were of assistance in enhancing athletic performance?

A. Yes, I think there have been a number of studies that promotes the fact that they do work in promoting strength.

20 The point that has to be considered is, I don't believe anyone has ever shown whether these steroids or these hormones taken prior to competition really do anything at all. It would seem to me that in the off season, when the athlete is training with weights and
25 developing the muscles that hopefully will propel them,

or something else faster, later in the year, it would seem to me that that's where the steroids play their primary role.

THE COMMISSIONER: Nobody suggested, I
5 think, that an anabolic steroid is the type of drug which you sort of pop in your mouth the morning of a race. That's not going to do any good.

I understand it's the long buildup over perhaps many years and the training area that gives you
10 that extra talent, extra ability to perform better.

THE WITNESS: Probably taking it a few months in the off season probably is where the best good ---

THE COMMISSIONER: That's what I meant, in
15 the off season. When you're training, though?

THE WITNESS: So the point is, I think coaches and athletes believe that if they continue it right up to competition time that it's going to enhance their performance. But, I don't believe anyone has proven
20 that.

THE COMMISSIONER: They're all very aware of a clearance time, as you know.

THE WITNESS: Yes, but that's just in relevance to passing a test.

25 THE COMMISSIONER: Yes.

THE WITNESS: But, does it really do any good for their performance when they're no longer lifting weights and strictly out on the track running and perfecting their technique?

5 THE COMMISSIONER: As I understand it, it's the training period well before the competition?

THE WITNESS: Well before, yes.

THE COMMISSIONER: That really -- that really has its great impetus in the overall performance later on down the road.

10

THE WITNESS: But, sir, if that were believed by all, then we wouldn't have to worry about the drug testing since ---

THE COMMISSIONER: No, but that's -- it's banned as -- you're not allowed to use this substance because of enhanced performance.

15

THE WITNESS: At the time of competition.

THE COMMISSIONER: And -- well, the positive finding of the positive test is evidence that you've been taking the steroid.

20

THE WITNESS: But except in one case, most of these drugs, but particularly the orals, are out of your body within a week and every athlete, every coach around knows that.

25 THE COMMISSIONER: I understand what you're

saying? Therefore, it's -- the theory that this testing after the race is meaningful is very much in doubt.

THE WITNESS: Yes. I think that -- I've implied that the testing is not -- is without value but it certainly is with value.

If you didn't have the testing, then I'm afraid it would, in track and field, especially track, would escalate to the drug taking situation we have in the body builders today where they're taking 12 to 15 to 18 different drugs.

THE COMMISSIONER: I understand.

THE WITNESS: And I think that it would --

THE COMMISSIONER: The evidence that I have had so far, as I understand it, I may have misunderstood it, that the effective use of anabolic steroids is part of a training program. You can't just sit behind a desk and pop these pills down and think it's going to do any good?

THE WITNESS: That's correct.

THE COMMISSIONER: And it's over these years of training that the athlete gets the benefit of the drug, the enhancing performance which he carries with him into the race without it being in his system at that time?

THE WITNESS: That's correct, yes, sir.

THE COMMISSIONER: All right.

MR. ARMSTRONG:

Q. Indeed, Doctor, just picking up the Commissioner's last thought, you have raised this in your book, and I am just reading an excerpt page 9 where you say:

"The use of anabolic steroids is not a short cut as far as shorter workouts are concerned. If anything, the athlete on anabolics must work harder not less."

Just following that thought along, I judge from what you are saying and from what the Commissioner is

saying in the discussion that the two of you were just having is that you agree that the benefit of these drugs is in fact during the training session, that is prior to competition when the athlete, as we used to call it in the old days, getting into shape as it were.

Now, I know athletes are in shape year-round, but when the athlete is building up a long time before the competition, that's when the steroids are of some assistance, right?

A. I think that's where they are probably of greatest assistance.

Q. All right.

A. Six months before.

THE COMMISSIONER: There is some evidence here that the athlete who takes anabolic steroids is capable of working harder on a daily basis?

THE WITNESS: Yes, that's correct, sir.

THE COMMISSIONER: Both psychologically and I guess physically as well, that they are eager to get back instead of being stiff and tired and not wanting to work out the next day, they want to get back the next day, every day and do better, more and more.

THE WITNESS: I think they are seeing greater gains in muscle size and --

THE COMMISSIONER: So, there must be a

psychological impact, too, to the --

THE WITNESS: I am certain there is.

THE COMMISSIONER: All right.

5 MR. ARMSTRONG:

Q. Then perhaps carrying your evidence
along step further, I think probably you are telling us
something that we haven't heard too much of or at least
haven't focussed on and that is from your information and
10 probably your experience prior to getting out of this
practice, that, indeed, some athletes at least thought
that if steroids helped during the training period, that
they also might help right up through to the time of
competition. And so, they would take these drugs for as a
15 long a period as they could cutting it as close as they
could to the competition.

Is that what you are suggesting is a factor,
at least from your experience and information?

A. Athletes and coaches feel that way.
20 And they still feel that way obviously today.

Q. All right. Just giving you another
quote from your book, I think this perhaps summons up the
question that I was asking you as to the effect of these
drugs when you say at page 13:

25 "Anyone who says that anabolic steroids

does not build stronger, bigger, faster
bodies is simply blind, deaf and ignorant or
just misinformed."

5 I take it that is still your view today, is
it?

A. I think it is the view of everyone who
has dealt with athletes in the same regard.

10 Q. Now, when you were in this practice
involving both advice and guidance to athletes in respect
of their use of anabolic steroids and the prescribing of
anabolic steroids, it was, of course, as I understand it,
perfectly legal in California to prescribe anabolic
steroids, and you could prescribe them and an athlete
could go to a pharmacy in California and obtain them, is
15 that so?

A. Any pharmacy, and --

THE COMMISSIONER: Even if the sole purpose
is to enhance performance?

20 THE WITNESS: Oh, yes. I spoke to a member
of the State Medical Board, oh, probably eight, nine
years ago, and I asked --

THE COMMISSIONER: In other words, you had
a perfectly healthy patient?

THE WITNESS: I am sorry?

25 THE COMMISSIONER: I am assuming now that

you have a perfectly healthy patient, and he wants to take drugs only to increase his athletic performance.

THE WITNESS: That's correct.

THE COMMISSIONER: And I am not being
5 critical, I am being quizical, and --

THE WITNESS: Otherwise you would be critical of plastic surgeons, couldn't you?

THE COMMISSIONER: Well, I am not sure whether a plastic -- that's elective surgery, I am not --
10 but --

THE WITNESS: But this is elective --

THE COMMISSIONER: Unless there is something wrong with the surgery, there is no potential side effects to plastic surgery.

15 THE WITNESS: Well, I think a plastic surgeon would disagree with you.

THE COMMISSIONER: Well, let's talk about steroids.

20 THE WITNESS: Well, let's face it, medicines of all types and surgeries of all types --

THE COMMISSIONER: All have risks, I understand that.

THE WITNESS: -- have their share of dangers.

25 THE COMMISSIONER: But I am just asking

that you have a perfectly healthy patient, I understand what the practice is, and you give drugs. Normally, I would think, and I think you would accept this, that I think the basic principle of medicine is that a doctor
5 doesn't give drugs to a healthy patient?

THE WITNESS: Well, then we wouldn't use to Rogaine to grow hair in baldness, and we wouldn't use the products that are used to take wrinkles from the face, widely used throughout the country, particularly by
10 dermatologists. These are cosmetic effects, too.

THE COMMISSIONER: Well, I wouldn't think that giving steroids -- I am just being quizical because we are having this debate. You know in Ontario now you can't -- it is unprofessional conduct to give drugs for
15 the sole purpose of enhancing performance, but that was a recent rule.

And has that changed in California or is it still permissible?

THE WITNESS: Two years ago --

20 THE COMMISSIONER: I understand at the time you were doing it it was regarded as an appropriate medical practice. I am not challenging that.

THE WITNESS: But the problem was that, as I say, to catch a black market dealer or even an athlete
25 with black market drugs was a misdemeanor, and it was

usually dismissed.

THE COMMISSIONER: Well, you know they have tightened up in the laws in United States very much in anabolic steroids, as you know, both state and Federal.

5 THE WITNESS: So, in California, two-and-a-half years the law was enacted that would make it a felony to possess this.

THE COMMISSIONER: Yes.

10 THE WITNESS: At that time, drug stores were discouraged from carrying anabolic drugs. I have spoken in the last four months to three California physicians who are still prescribing steroids who did not know about this law.

15 I think the law was not -- I don't think physicians were notified well enough.

20 Now, interestingly enough, a pharmacist in my area said that his pharmacy newsletter about three months ago made the statement that because they were not seeing the side effects that they had thought possible that they were considering bringing back steroids. And I don't understand that.

25 THE COMMISSIONER: Well, we getting back -- but you are familiar now with both California state law and Federal laws dealing with steroids which they are being amended recently as three months ago in California?

THE WITNESS: Right. And without this we would not have been able to put a lot of these people behind bars who were making these drugs and selling them on a large scale.

5 THE COMMISSIONER: And there are present amendments to the federal state laws on the subject, that you are aware of?

THE WITNESS: Yes, I have dealt with the --

10 THE COMMISSIONER: Well, we are getting into --

THE WITNESS: Food and Drug, the DEA and the FBI in putting a lot of these people behind bars, but before they wouldn't have been interested.

15 THE COMMISSIONER: I understand. Go ahead, Mr. Armstrong.

MR. ARMSTRONG:

20 Q. All right. Just to sum up, the present law as you understand it in California is that it is in fact illegal simply to possess steroids, is that --

THE COMMISSIONER: In California?

MR. ARMSTRONG: In a California.

25 THE COMMISSIONER: It's illegal to have possession for distribution, I think is the word.

THE WITNESS: I think possession of a black market variety, but from what I have been told, doctors are still, in a limited scale, are still writing prescriptions. I don't understand if it's been withdrawn
5 from the pharmacies how that can be possible, but apparently not everyone has been notified of that.

THE COMMISSIONER: Well, I am taking you off your course, Mr. Armstrong, sorry. We might come back.

10

MR. ARMSTRONG:

Q. You were involved in, as part of your practice, in the advising and prescribing of steroids up until about four or five years ago, I think you told me?

15

A. About five years ago, yes.

Q. And you got out of the practice at that time, you are no longer involved in either advising or prescribing the use of steroids?

20

A. In fact, new patients are advised if they even mention word steroid that's the end of our session.

25

Q. Now, could I just ask you a little bit about the nature of your practice. And going back to your book just to start it off, I am going to read you an excerpt from page 5 of your book where you say, speaking

in 1982 when you wrote the book:

"My practice today includes both private patients and anabolic steroid patients alike. The anabolic patients number several thousand and come not only from the United States but from a number of foreign countries as well. A few of my patients seek my advice simply for gaining weight and for developing and trim muscular beach physique, but the majority of my anabolic steroid patients are involved in power lifting or body building in all levels, from amateur to world class competition quality. I see athletes today from most every athletic endeavour except perhaps for marathon runners as they are interested in stamina, not just size or speed."

I take it, Dr. Kerr, that during the period of the early to mid-eighties when you gave up your practice in this area that that is an accurate description of what athletes -- what kinds of athletes used your medical advice at that time?

A. That's correct.

Q. And indeed you told me yesterday that apart from the body builders and power lifters and so on

that made up a large number that the range of sports included baseball, football, ice hockey, something called roller hockey, which we Canadians don't recognize as a sport, track and -- and my apologize to the roller hockey people, I hope -- but track and field, cycling, and even some swimmers, I believe?

A. That's correct.

Q. And you indicated to me yesterday as indeed your book would suggest that your practice included athletes from the amateur to the professional level, that is from really the club level to international competition?

A. That's correct.

Q. These athletes who came to see you during the period of time that you were involved in this practice, indeed, included Olympic athletes who have been medalists; of course, including gold medalists in the Olympics?

A. That's correct.

Q. And you were advised, I believe -- you advised us I believe that you were referring not only to Americans, but to athletes from other countries?

A. That's correct.

Q. Without, of course, naming names what other countries did the athletes come from?

A. South America, Far East, and certainly Europe.

Q. Indeed, I think we have evidence here that we are going to talk about in a few minutes, there's been at least one Canadian who has been to see you and I believe at least one Australian, is that not so?

A. That's correct.

Q. All right. Then --

THE COMMISSIONER: Over what years are you speaking of? You gave up this particular part of your practice, what, after '84.

THE WITNESS: Yes.

THE COMMISSIONER: I see. So, you were around in the '84 Olympic period, were you?

THE WITNESS: That's correct.

THE COMMISSIONER: So, your practice was in this area was about, what 10 years?

THE WITNESS: At least that.

THE COMMISSIONER: Dating back from '84 to say '74?

THE WITNESS: If not long before that.

MR. ARMSTRONG: I think he said earlier that he began to get interested and involved in the late sixties.

THE COMMISSIONER: Yes, as to study it, I

didn't know whether he started --

MR. ARMSTRONG: I followed up with a question that he said that, and perhaps we can clear it up, but that when you started advising and prescribing that at least in the small way you were started in the late sixties, am I right?

THE WITNESS: That's correct.

THE COMMISSIONER: I see. So, it is approximately 20 years, just under 20 years?

THE WITNESS: I am not certain it was that long, but close.

THE COMMISSIONER: All right.

MR. ARMSTRONG: Well, indeed, if we look at --

THE COMMISSIONER: Nothing turns on it.

MR. ARMSTRONG: Yes.

THE COMMISSIONER: Perhaps it does.

MR. ARMSTRONG: Yes, if we look at your book, out of 18 years of private medical practice, "I have been treating athletes with anabolic steroids for 16 of those years", which --

THE COMMISSIONER: What date is the book?

MR. ARMSTRONG: 1982. It would have gotten you back into the late sixties.

MR. ARMSTRONG:

Q. Then you obviously became well-known for your interest and expertise in this area. And, indeed, I wanted to ask you in particular about a meeting that you had at some point prior to the Los Angeles Olympics with a group of what we call throwers, and you know what I am mean by throwers, the field event athletes who were involved in discus, shot put, et cetera.

Could you just tell us a little bit about that, again I am not going to invite you to name names, but could you tell us that meeting?

A. Yes, I believe it was about 1982. And apparently this group of field eventers, which seemed to be primarily Americans. I do remember a coach from Europe, perhaps Ireland, as I recall. And I gathered that they had met regularly to discuss various aspects of their field event participation.

They, through Dr. Paul Ward asked me if I would be the speaker at this one meeting. And it was at a hotel in Hollywood. They particularly wanted to know about what was going on, to my knowledge, in Europe with the use of human growth hormone.

By the time we got to the question and answer session, they were asking about various anabolic drugs. They appeared to be well versed in their knowledge

of these drugs. And so the questions were certainly not amateur questions.

The meeting lasted probably three to four hours far beyond the time limit.

5

10

15

20

25

MR. ARMSTRONG:

Q. And this group of field eventers, as you've described them, among them were there some American Olympic athletes?

5 A. Well, most of them were athletes. Most of them were. Even though I didn't know them personally, I recognized rather big names in field events or had been big names in their competition years, and I gather there were some coaches also.

10 Q. Then the Olympics in 1984, as we know, were held in Los Angeles, and I understand that during the course of the Olympic Games in Los Angeles, you had occasion from time to time to meet with coaches, athletes, doctors, who were there attending the Olympic Games and to
15 talk to them about, among other things, the current use of steroids and what some of the practices were; is that so?

A. That's so, and on two or three occasions I saw athletes with injuries that needed to be treated.

20 Q. And I understand also that during the course of the Los Angeles Olympic Games, that a European physician who was knowledgeable about the eastern European situation indeed stayed at your house?

A. That's correct.

25 Q. And this individual was someone not

only who was knowledgeable about the situation, but who had been involved in the actual training, as opposed to doctoring, the actual training of athletes behind the Iron Curtain or in the eastern bloc countries; is that right?

5 A. Both east and west, yes.

 Q. All right. And as a result of the information that you got from that physician and from others, I understand you had occasion to raise the subject with some of your sports medicine-sports scientist
10 colleagues at a meeting in San Diego the following spring?

 A. Actually we had met at the yearly meeting of the American College of Sports Medicine in San Diego. At that time, I was notified that there would be a round table discussion involving steroids, and there must
15 have been 30-some physicians, PhD.'s, et cetera.

 Dr. Voy, who was the medical director of the U.S. Olympic Committee was there and others. It was the first time I had met some of these physicians. There were at least two physicians who had written more than one book
20 on the topic of steroids at the time.

 Q. Yes? And the people --

 THE COMMISSIONER: Americans or Europeans?
I'm sorry, I didn't hear you.

 THE WITNESS: I believe they were all
25 Americans.

THE COMMISSIONER: Thank you.

MR. ARMSTRONG:

Q. And did you share with these colleagues
5 some of the information that you had obtained from the Los
Angeles Olympics that we have just referred to?

A. I shared information with him at that
meeting prior to the '84 Olympics, and then following the
'84 Olympics, I wrote a letter to a few of them discussing
10 various aspects, things that I had picked up during the
Olympics that I thought they might be interested in.

Q. All right. And was there some
discussion or some hope at that time that maybe this group
might attempt to foster some research project in the area
15 of steroids?

A. Yes, obviously a physician or two who
was doing some data gathering in his own practice, that's
useless as far as scientific evidence. You really need a
large institution at the university level or something
20 like that. So I was hoping that since at least two of
these people were connected with large institutions in the
east, that perhaps they might carry some weight in
developing good research projects instead of the hearsay
and quasi-scientific things that you read about in lay
25 magazines and so forth.

Q. And you said a moment ago that you wrote a letter to this group, and indeed you have been good enough to supply us with a copy, and I propose to file it as an exhibit and review some of its contents, Mr. Commissioner, with Dr. Kerr.

THE COMMISSIONER: 204, Mr. Armstrong.

THE REGISTRAR: 204, Mr. Commissioner.

---EXHIBIT NO. 204: Letter dated March 1, 1985, from Dr. Kerr to John A. Lombardo, M.D.

THE COMMISSIONER: Before that, were you aware of -- we've heard evidence that prior, some months prior to the 1984 Olympics, I think it was the U.S. Olympic Committee had submitted several athletes to the test.

THE WITNESS: I was told by a number of athletes that testing was available. This was in the fall of the year, as I recall. They simply could show up at this lab, submit their urine and be told later what the result would be, and no records would be kept, and I never did gather who was behind all of this.

Dr. Paul Ward seemed to be very knowledgeable and perhaps instrumental in this.

THE COMMISSIONER: But those who were found

to have tested positive were not to be disciplined or suspended in any way, I understand?

THE WITNESS: That's correct.

THE COMMISSIONER: And if they were proved
5 positive, then they had lots of times to sort of clean themselves out by the time of the Olympics.

THE WITNESS: I would assume that whoever set up this testing expected a lot of these people to flunk the test, and maybe that would be a warning to them.
10 I don't know how many flunked the test, but the people that I spoke to all told me that they did perfectly well. They were very pleased with the result.

THE COMMISSIONER: I have said there has been some evidence before a senate committee in the United
15 States on how many flunked the test. You don't have any direct knowledge yourself?

THE WITNESS: No.

THE COMMISSIONER: Thank you. This letter is written in '85.

20 MR. ARMSTRONG:

Q. Yes, we might just turn. There is a reference to what the Commissioner is referring to in your letter at page 6. If you go to the bottom of page 6 of
25 Exhibit 204.

5 "The laboratory testing for anabolic drugs
that was carried out last winter, along with
private testing in this country, seemed to
imply and led the athletes and coaches to
certain ideas on when to halt the drugs and
pass the test. The rule used by American
men was to halt the Dianabol fifteen to
seventeen days before the test. The
Russians seemed to halt their Dianabol about
10 twenty days. Anadrol was thought to be more
like thirty-nine days and Anavar seemed to
be free from the system in either a few days
in women to five to seven days in men. The
one product that was certainly not used was
15 Deca-Durabolin. My observations and my
communication with Doctor Voy show that they
have found this to remain detectable for,
perhaps, five to six months. In this
regard, I spoke to Doctor Voy about a
20 possible serious problem that could occur to
some of our track athletes in the near
future."

And you go and talk about Bolasterone. In any event, is
it not so, Dr. Kerr, that you became aware from your own
25 athletes with whom you spoke that, in effect, they were

really using this laboratory testing scheme, whatever it was, to establish their own clearance times?

A. That's correct. In fact, I think the observations that they found was that with men, they could
5 halt the Dianabol, rather than 15 to 17 days, more like 7 days, and the women found that they could lower their Anavar to a much shorter period of time in days. I think the coaches and the athletes felt that they learned something from this that helped them later.

10 Q. All right. And indeed I suggested to you this morning that one of the official explanations for having done this was that it was done in order to test the equipment, as it were, prior to the Los Angeles games, but you've said that in fact you've never heard that
15 explanation until I suggested it to you this morning?

A. That was the first time I have ever heard that mentioned, yes.

20 Q. All right. Then let's just turn to some other parts of this letter. First of all, it's addressed to John A. Lombardo, and you show copies going to Captain James Wright, Richard Strauss, William Taylor, Robert Voy.

25 We know Dr. Voy, and you've just mentioned him as the former chief medical officer of the United States Olympic Committee. Now who are these --

THE COMMISSIONER: Who's Lombardo?

MR. ARMSTRONG:

5 Q. -- these other people? First of all
Lombardo?

A. Dr. Lombardo chaired the round table
discussion at the American College of Sports Medicine
meeting and that's why I primarily addressed it to him.
He is with the Cleveland clinic in some aspect of sports
10 medicine.

Captain James Wright is Dr. James Wright, a
PhD., who up to this point had written probably the first
two books, that I am aware of, on the use of anabolic
steroids as a physiologist. Dr. Richard Strauss is with
15 Ohio State University.

Dr. William Taylor I understand is now
living in Washington, Washington state, and he has
written, to my knowledge, three books on the use of
anabolic steroids. Dr. Voy from that initial meeting in
20 San Diego, he and I have communicated dozens and dozens of
times over the years. That was my first meeting with him.

Q. And again, as I understand it, the
purpose of this letter was as a follow-up to discussions
you had and to put down in black and white, as it were, a
25 sharing of the information that you had gleaned

principally at the time of the Olympics in Los Angeles?

A. Yes. In fact, I not only mentioned the main topic, but in some of these cases I said that I had learned formulas and so forth and I would be glad to share those with any of these doctors who would request it.

Q. Let's just read the first -- second paragraph rather.

"During this last summer's fine Olympic games I was introduced to a number of colleagues of ours from other participating countries and from physicians who train athletes behind the Iron Curtain. One of these physicians stayed at my house for about seven weeks during and after the Olympics, and he was particularly helpful once he saw that there were no bugging devices nor KGB agents outside. This material that I am discussing in this manuscript has mostly been collaborated--"

Do you mean corroborated?

A. Corroborated.

Q. Corroborated --

-- by others so some of this must be considered on whatever merit you give it. I have not included in this rumours and

unfounded statements."

Now, first of all, tell us a little bit, if you will, about who the physician was who stayed at your house for this seven-week period?

5 A. Yes, his name is Dr. Guillermo Laich, L-A-I-C-H, who at that time was practicing in Madrid, Spain, practicing sports medicine.

 Q. All right. And did he, however, have some connection with the eastern bloc and was he involved directly with athletes in the eastern bloc?

10

 A. He was.

 Q. In what capacity?

 A. Just as a consultant. I think there is where he - during his last couple of visits - felt that bugging devices were used in his room and agents were watching him and so forth.

15

 Q. All right. Then in the next paragraph, Dr. Kerr, you say:

 "My informants tell me that a great deal of the research time and money in the eastern block countries is being devoted to

20

 'blocking agents'--" And then you go on to describe a number of centres that have been set up, and most of these Soviet-backed countries are staffed with biochemists and technologists, et cetera.

25

Q. And you talk about the blocking agents and further down the paragraph you say;

"In most cases it appears that the blocking agent is given within a week of testing and perhaps, in most cases, five days."

Now, just -- I don't intend to go through your letter coma by coma because we can all read it, but does this paragraph, for example, indicate that it was your information from your informants at that time that the research that was being done on blocking agents, for example, if not anabolic steroids or performance enhancing drugs as a whole, was being done on an organized state-supported institutional basis?

A. That's what I was told. I was even given the names of the research institutions, particularly in around Moscow.

Q. And did -- was it your understanding from your informants that the research indeed involved direct research with athletes who were taking the particular drug?

A. The informants told me that while they were there, the athletes were coming in, giving their specimens of urine to be tested and it was their knowledge that these specimens were being used to evaluate blocking agents.

Q. What about co-operation among the Eastern European -- Eastern Bloc countries? Did you have any sense at that time as to whether, for example, the Soviet Union was cooperating with East Germany and so on or was it the reverse of that?

A. I was told there was no co-operation. In fact, an athlete and her coach from an iron curtain country, when I was treating her for a tendonitis, claimed that there was no love lost between the Russians and the athletes and coaches from her country and as far as they knew, the other iron curtain countries.

Q. And when you were involved in this practice, and particularly at the time of the Los Angeles Olympics, did you indeed see Eastern European athletes in relation to injuries they may have had, conditions they may have had?

A. I saw no Soviet Bloc athletes at that time for injuries, no.

Q. What about from other Eastern European countries?

A. Western European, middle European.

Q. All right. And then if I could take you over to the next page, one rather important -- this is the third paragraph on the next page -- one rather important item is the use of a testosterone agent that

apparently is undetectable with today's testing methods.

And then you provide some more information.

You go on to say;

"They tell me that this product can, since
it is not detectable ---"

at the bottom of this paragraph;

"They tell me that this product can, since
it is not detectable, be used even on the
day of competition and apparently has been
available for somewhere for between eight to
twelve years."

Now, in the same vein, let me ask you
this; was it your information at the time of writing this
letter that indeed on a -- on an institutional state
supported basis that some of these Eastern European
countries were indeed conducting research into better
performing drugs and less detectable drugs directed
specifically at the athletes for the purpose of increasing
athletic performance?

A. You know, I don't recall my -- what my
source said about this one form of testosterone but --
whether it was state supported or whether it was just
individuals.

But, as I recall, they had experimented with
a number of even non-mammalian types of testosterone. And

in many cases, they found that it either didn't work or that an allergic reaction occurred. But with this one animal, he said they did not find allergic reactions and since they were not testing for non-human testosterone, that it seemed to be a sensible thing to do.

I called Dr. Catlin at UCLA who runs the Olympic lab, detection lab, and I made him aware of this, along with Dr. Voy of the USOC. Dr. Catlin said he had not heard of it before that time and he said he wouldn't know, until he tested it, whether this was true or not.

THE COMMISSIONER: What would be the source of the non-human testosterone?

THE WITNESS: It was from the ram.

THE COMMISSIONER: Pardon?

THE WITNESS: The ram.

THE COMMISSIONER: The ram.

MR. ARMSTRONG:

Q. All right. Then, you have, in the next paragraph, a reference to blood doping about which we heard a fair amount from one of the authorities in the field in the early part of our hearings and I just wanted to take you to the third sentence of that paragraph where you say;

"Two of my patients who are cyclists and

were on the Olympic team said that they were told that if they trained in Colorado, then they might not need the blood doping.

But if they did not train in Colorado, then a coach who shall here be nameless required the blood doping procedure.

I also told by a woman sprinter that her coach wanted to perform this blood doping procedure and, of course, I could not quite understand that since this should be apparently used on distance runners."

In any event, going back to the fact that the ---

THE COMMISSIONER: Well the next line, I think is important.

MR. ARMSTRONG: Sorry. Yes, I was going to come back to that. But, we'll read that in now.

MR. ARMSTRONG:

Q. I think we all know the potential hazards of the use of blood transfusions and it is rather alarming to hear of this being performed not in only in this country but in other countries by members of the coaching staff.

Now, first of all, going back to the first

sentence that I read, I understand that indeed you brought this fact to the attention of Dr. Voy of the US Olympic team that a particular coach was insisting that two of your patients either train in Colorado or, alternatively,
5 involved themselves in blood doping?

A. Yes. And, as I recall, an investigation found this to be true and I believe he was fired.

Q. The coach was fired?

10 A. Yes.

Q. All right.

A. In the case of the sprinter, I notified Dr. Voy of this fellow's name and I don't know that enough evidence was ever gathered to do anything about him.

15 But, as physicians, we all know today that hepatitis, AIDS, transfusion reactions, whatever, they were all rather hesitant to give anyone blood if there is any way around it.

I have never heard of a case of blood doping
20 whether it's in this country or whatever country, where it was carried out by physicians or hematologists, for that matter. It's always a coach that's involved. I've asked these -- this one coach, when he approached me about giving blood to this -- to this sprinter, I said, where do
25 you plan on keeping the blood? He said, I don't know. I

asked the athlete, I said, was blood taken from you and then stored somewhere. And she says, no. I was going to be given somebody else's blood.

5 So, it sounds like a very risky, very risky situation.

Q. All right. All right. Then, over at page 4 you talk about, the first full paragraph, you talk about the situation in Western Europe and say that most of the Western European countries seem to be very
10 disorganized in their use of anabolic or ergogenic drugs with their athletes and then you go on to discuss the situation there and what the athletes appear to be taking and about halfway down the paragraph, you say;

15 "But the one drug that seemed to stand out as being used throughout Europe, east and west, was Stomba and this appears to be a ten milligram Yugoslavian version of Winstrol".

A. Yes.

20 Q. Right?

THE COMMISSIONER: What page are you at, Mr. Armstrong?

MR. ARMSTRONG: I'm sorry, page 4. It's the first full paragraph, Mr. Commissioner, about two-thirds
25 of the way down.

THE COMMISSIONER: Thank you.

MR. ARMSTRONG: "The one drug that seems to stand out".

THE COMMISSIONER: Yes, I have it now.

5 Thank you.

MR. ARMSTRONG:

Q. Now, I just want to ask you a question about that because in reading -- re-reading your book over the weekend, I noted that you, in 1982 when you wrote the book at least, were very critical of Winstrol. Indeed, you described Winstrol tablets at least as really quite useless and not much better than a placebo.

10 We've heard a lot of evidence here about Winstrol and it's usefulness and otherwise. Are you aware of an injectable Winstrol, which is a Winstrol V or a Winstrol for veterinary use, which was available at that time? Did you have any information about that when you wrote your book?

15 A. In my book, you'll notice there are no European drugs. The only drugs that are mentioned are the ones that were available legally. I wanted to have nothing to do with drugs that are being brought in from Europe.

20 So the only available Winstrol was the

Winstrol tablet. I have never heard -- I've never known an athlete who said that he gained anything at all from oral Winstrol.

Winstrol V has been used by veterinarians. My practice is probably ten minutes from Santa Anita race track. I see four veterinarians from the race track who treating horses, race horses. I've asked them, 'What do you think of Winstrol V or Equapoise?'.
5

Now, Equapoise, I've been told, is the name of the horse that won the Kentucky Derby, or something, so that must give you some idea of what it is.
10

In each of the four cases they said, if we use it, we use it one time and we do not use it on young horses. It stunts their growth. Maybe that's why it has never been available in the US except to the veterinarians.
15

So, when I speak of Winstrol, I was speaking of tablets.

THE COMMISSIONER: You're speaking of the tablet form.
20

THE WITNESS: Yes. I was told by a European coach, just last year, that the reason the European version of Winstrol, the Stromba, is more effective is that chemically, it is levorotated, chemically speaking, whereas the American version is dextrorotated. So we're
25

talking about two different drugs.

THE COMMISSIONER: But, it's still pill form, though?

THE WITNESS: Oh, yes.

5 THE COMMISSIONER: Each has stanozolol in it?

THE WITNESS: But ---

THE COMMISSIONER: Is that right? They each have stanozolol?

10 THE WITNESS: Yes, but a different chemical configuration.

THE COMMISSIONER: A different compounding?

THE WITNESS: Yes.

15 MR. ARMSTRONG:

Q. All right. Then, Dr. Kerr, moving along in your letter, you refer at the bottom of page 4 as follows;

20 "They do seem to use a little more scientific basis for their administration of anabolic drugs. They've drawn up plans..." And here you're referring to the Europeans -- I don't know whether you're referring here to the Eastern Europeans or Western Europeans, sorry?

25 A. I've seen, from both, actual schematic

plans on not only which days of the week but hours certain drugs would be taken, whether they be anabolic drugs or amino acids or protein or whatever.

5 You know, the focus here is on steroids, steroidal hormones, male hormonal derivatives. Remember, that of the ergogenic, of the muscle strength enhancing drugs, this is just one part of it. There are all kinds of drugs that enhance performance that have nothing to do with hormones; absolutely nothing to do with hormones.
10 And these are used throughout the world by coaches and athletes.

 Someone has said recently that -- about Bubka, the Russian pole vaulter, about how he sniffs something prior to his competition and no one knows
15 exactly knows what that is. Of course, it could be smelling salts or something of that nature.

 But there is some conjecture that perhaps it has some magical properties but there are a lot of drugs that are used for various purposes.

20 Now, you said earlier that I made the -- I made mention of the fact that the marathoners are usually not into anabolic drugs. There's a drug that I've been made aware of the last few years from -- since '84, that is made in Mexico by a Bulgarian physician that seems to
25 enhance the uptake of oxygen and they tell me that it

works awfully well.

This was echoed by an Italian journalist who returned from the recent Winter Olympics in Canada and told me that some research was being carried out in Canada and that they had also developed a drug that would enhance
5 stamina, particularly I suppose in skating or downhill skiing or something of that nature.

THE COMMISSIONER: Did he give you anymore details than that?

10 THE WITNESS: No, he didn't.

THE COMMISSIONER: Where it was being made.

THE WITNESS: No, he mentioned the hospital but -- I keep a diary of things that are mentioned but I did not write that down.

15 THE COMMISSIONER: All right. Will that be a banned substance? Are you familiar with the banned substances in the --

THE WITNESS: This is a drug that nobody knows anything about it.

20 THE COMMISSIONER: Oh, I see!

THE WITNESS: I've asked Dr. Voy and Dr. Catlin and others.....

THE COMMISSIONER: They've never heard of it?

25 THE WITNESS: Never heard of it. So, you

can't ban something until you know about it.

THE COMMISSIONER: No, no. It's not very
easy to do that. But, you don't know any more about it
than that, thought? Whether there is in fact such a
5 thing being done?

THE WITNESS: I know it was used, to some
extent, to my knowledge, in '84 Olympics.

THE COMMISSIONER: I'm sorry, what was being
used?

10 THE WITNESS: This particular drug from
Mexico.

THE COMMISSIONER: From Mexico, yes.

THE WITNESS: Yes.

15 THE COMMISSIONER: What's the name of that
drug?

THE WITNESS: It's called PDH. I can look
that up, if you're interested

THE COMMISSIONER: What's it made of?

20 THE WITNESS: I've had this -- I asked a
physician from the University of Mexico about it and he
seemed to be well aware of its' name and why it was being
used.

25 In fact, he told me a couple of years ago
that they had improved the version of it. I don't know
that that's the case.

THE COMMISSIONER: PDH, is that what you're saying? You're saying PDH.

THE WITNESS: PDH. I believe it was Pyruvate-Dehydrogenase, as I recall. This is number two
5 of my little dairy books and it might have been in the other one. But I believe it's Pyruvate-Dehydrogenase is the drug.

MR. ARMSTRONG:

10 Q. Bottom of page 5 there is a reference to it, Dr. Kerr.

A. Did I mention it in that?

Q. Yes.

A. Okay. Oh, yes.

15 Q. All right.

A. I think that actually tells more than I had recalled knowing about it, but I think it tells quite a bit there.

Q. All right.

20 THE COMMISSIONER: I'm sorry. What Olympics Games are you referring to at the bottom of page 5, Mr. Armstrong?

THE WITNESS: 1984.

THE COMMISSIONER: Pardon?

25 THE WITNESS: 1984, sir.

THE COMMISSIONER: In L.A?

THE WITNESS: In L.A.

MR. ARMSTRONG:

5 Q. All right. And just to follow this up,
why don't I just read into the record;

10 "As the Olympic Games started, one of my
eastern European colleagues mentioned a
certain event in the Olympic competition
that was to be held the following week, I
believe, and he said, 'In that event, watch
the two Mexicans. They're going to win and
come in second.'"

15 I went to that day's activities with
this same physician and it turned out just
that way. He said, 'Notice as they finish.
They're not going to show the stress and the
tired effect that you're going to see in all
the others in that race.' He said they were
20 using a product known as PDH which is
Pyruvate-Dehydrogenase which is also known
as thymine pirophosphate or co-carboxylase.
This product was developed in Mexico and
is given as an intramuscular injection."

25 Let me just take you back, Dr. Kerr. I

may have missed part of what you said. The information about a drug that was being developed in Canada, used for the Calgary Games in February 1988 and what is your information there? I realize you're frank to say that you haven't got a lot of detail but let's get as much as you can give us, please?

A. Yes. It was an Italian newspaper man who came to visit me and to ask a lot of questions. I think he was researching a reported death of an Italian athlete some time before that I recall was involved with blood doping. His name is G-I-A-N, the first name. The middle name is P-O-A-L-O and the last name is O-R-M-E-Z-Z-A-N-O. He's from Las Stampa, S-T-A-M-P-A, Magazine, and he gave me his address and phone number.

And an aside, he mentioned this -- returning from Canada, he said that the hospital here, that a similar drug had been developed.

THE COMMISSIONER: As PDH?

THE WITNESS: PDH. I don't know if it's called PDH, but he implied -- we were discussing it and he said that it was a similar drug.

MR. ARMSTRONG:

Q. And was -- and did he believe that that was a drug that had been used at the Calgary Games or he

didn't ---

THE COMMISSIONER: Well, it was used in '84, thought. That's what puzzles me. If it was already known from Mexico, it wouldn't be new then, would it, doctor?

5 THE WITNESS: I think he -- I believe he said that it was new, that they had just developed it and I don't believe that he made any mention that it had been used in athletic trials yet.

10 THE COMMISSIONER: So it wouldn't be PDH then because that was being used already in '84?

THE WITNESS: Well, it's whatever they wanted to call it.

THE COMMISSIONER: I see.

15 THE WITNESS: He didn't even know the name at the time, or if he did ---

THE COMMISSIONER: But, that's all you know, though, is this newspaper reporter making inquiries?

20 THE WITNESS: Frankly, I couldn't understand him and I'm sure he couldn't understand me, part of the time, so I don't know if he mentioned the name or not. I certainly didn't hear it and I didn't want to embarrass myself by asking him to repeat something.

THE COMMISSIONER: All right.

25 MR. ARMSTRONG:

Q. Then, at the top of page 5 of your letter, you refer to something that I don't believe we've heard about in this hearing before and that's something called muscle biopsies and could you just tell us what the information was you had at that time as to who were doing muscle biopsies and what the purpose was?

A. Yes, Dr. Leich, Ulerma Leich, in Madrid, that I mentioned, wrote his Ph.D. thesis -- he had an M.D., but this was his Ph.D. on this particular subject. He mentioned a pathologist in an iron curtain country who had performed probably hundreds of these biopsies.

The idea was to use the vastus lateralis muscle of the leg, the lateral thigh, in runners or the posterior deltoid muscle in throwers, on the dominant arm, of course. And a needle biopsy of the muscle would be taken, a very tiny thing -- an 8th inch incision would be made and the needle would be implanted and a small piece of tissue removed.

This would undergo rather an elaborate process which would identify the various muscle fibre types. Some of these fibre types are slow twitch, such as what you might see in a marathoner, for instance, and some are more explosive fibres that you would see in a sprinter.

The idea then was to put the athlete on a hormone therapy, training therapy, to promote, let's say, more explosive fibres in a sprinter.

5 Six months, four months perhaps later, a re-biopsy was taken about half an inch from the other and under the microscope or on a projector, you could see the changes in these muscle fibres.

10 The thought was that if the athlete stopped training, the fibres would return to their original type and would not remain that way. But, this is actually manufacturing then a more exquisite athlete as far as speed, power, strength or whatever.

THE COMMISSIONER: It sounds like the bionic man.

15 THE WITNESS: Or Frankenstein.

THE COMMISSIONER: Or Frankenstein, right.

20 THE WITNESS: But, for instance, on a -- I think I made some note -- I don't know if I brought it with me. But the point is, in the right-hand shot-putter ---

THE COMMISSIONER: He's done 2,000 of these?

THE WITNESS: Yes. That's what I was told, at that time.

25 THE COMMISSIONER: What happened to these people?

THE WITNESS: I have no idea.

THE COMMISSIONER: The patients, I mean?

THE WITNESS: I have no idea. This was an eastern country and, to my knowledge, I don't know. For instance, in a right hand shot-putter you would want more explosive fibres in the right arm. In the trailing arm, in the left arm, you wouldn't really care about explosiveness.

But, with the legs, you might want more explosiveness on the rear leg that's propelling the body and in the left leg you're not interested in that explosiveness. So actually, you could have, in this regard, you could biopsy both areas of the body and you could have muscles fibres of a different type on each side.

And, to my knowledge, I don't believe there's one physician who's doing muscle biopsies at this time, but I understand it's still being done. I received a phone call from a physician in the Riverside, California about a month ago and he is considering doing this type of procedure on athletes with whom he trains and I don't know about the steroid. There was some mention of this and I tried to dissuade him from getting involved with the steroids but he was interested ---

THE COMMISSIONER: What is the follow-up to

the surgical procedure? You said a growth hormone or --

THE WITNESS: A followup?

THE COMMISSIONER: A followup? What happens afterwards? Are they then given drugs?

5 THE WITNESS: Well, they might -- I was told that they might use drugs. They might certainly use training techniques.

THE COMMISSIONER: You said you had a discussion with this doctor from Riverside and you also
10 mentioned steroids with him, too. Is it connected with--

THE WITNESS: He was talking about perhaps using steroids with some of these people and --

THE COMMISSIONER: After the surgical procedure?

15 THE WITNESS: Yes. To promote a faster twitch fibres in a certain type of athlete. Different sport than we're talking about today. And I told him that training them in that manner might be fine but that he really should think about staying away from the steroids
20 and I don't know what's going to happen there.

THE COMMISSIONER: All right. I think we'll take a break now, Mr. Armstrong.

MR. ARMSTRONG: All right,

THE COMMISSIONER: Thank you.

25

--- Upon resuming.

THE COMMISSIONER: Mr. Armstrong.

MR. ARMSTRONG: Thank you, Mr.

Commissioner. I am sorry to have kept people waiting. I
5 had to attend to another matter.

MR. ARMSTRONG:

Q. Dr. Kerr, there is just -- I just want
to go back to the subject of muscle biopsy just in case I
may not have been the only person who was a little bit
10 confused.

The idea of the first muscle biopsy, I take
it, is to take a tiny little bit of the muscle out and to
get what you physicians call the baseline reading. Is
that not so as to what the situation is with these fast
15 twitch or slow twitch fibres, whatever they are?

A. Yes. Those that do this procedure
receive a very tiny slice of tissue that then can be
analyzed histochemically, biochemically and can certainly
tell the condition and the type of muscle fibre type,
20 whether it's an explosive fiber or slow twitch or
whatever.

And in some schools they had use the
vertical leap as a measurement of this, which isn't very
scientific, but it gives you a rough idea. If you can
25 jump a certain height, well, then they determine that you

have a faster twitch fibre they might put you as a sprinter rather than a long distancer. This makes it a little bit more scientific.

Then if the fiber type is not exactly what's needed for that particular event, then an exercise program or whatever could be instituted to change the fibre.

Q. All right. And an exercise program or, indeed, which might include some kind of performance-enhancing drug?

A. It might.

Q. All right. And then subsequently one of the ways of ascertaining on how the program is working quite apart from the athlete's performance is a subsequent biopsy can be done to check to see if the desired results have been obtained?

A. That's correct.

Q. All right. Just so that we have it clear, I think it's very clear now, you weren't talking about anything like some kind of muscle transplant or any thing like that?

A. Absolutely not.

THE COMMISSIONER: I am sorry, then is it to determine the efficiency of the steroid, is that what you are saying?

THE WITNESS: No. It's really to

determine what the type of muscle the athlete would have and then whether that needs to be altered through training.

THE COMMISSIONER: Where do the steroids
5 come into the picture at all?

THE WITNESS: Well, as I say, it is primarily, these fibres are changed, from what I have been told, by training techniques. But I have been told that they could also use steroids to also help with the change,
10 but I think the primary thing is the training, the type of training.

THE COMMISSIONER: I see. Thank you.

MR. ARMSTRONG:

15 Q. All right. Then just a couple of more comments from your letter. There was some information earlier on that I overlooked. At page 3, you say:

"Two products that have found quite a bit of use in the Eastern Bloc countries are nerve
20 gas and strychnine. My eastern source for this states emphatically that though strychnine is deadly in high doses, at low doses, 'it is the most powerful central nervous stimulant and barbiturate
25 intoxication neutralizer available'. They

had mentioned that sometimes the strychnine is combined with a caffeine or barbiturate intoxication preparation that highly increases the action of the drug. It is apparently given 30 to 60 minutes before competition and appears to be used primarily in strength athletes."

THE COMMISSIONER: What page are you reading from, Mr. Armstrong?

MR. ARMSTRONG: Sorry. Page 3, second paragraph.

THE COMMISSIONER: Thank you. You have covered that.

MR. ARMSTRONG: Yes, I am sorry, I took you back.

THE COMMISSIONER: All right.

MR. ARMSTRONG:

"It is apparently given 30 to 60 minutes before competition and appears to be used primarily in strength athletes. If any of you are interested in the dosages used in the Eastern Bloc I will be happy to supply that to you."

And that information came from whom about the strychnine and nerve gas?

A. Dr. Leich.

Q. Dr. Leich. All right. Then you mention Bolasterone -- I am back at page 7 now. What is Bolasterone?

5 THE COMMISSIONER: Whereabouts, what --

MR. ARMSTRONG: Page 7, first paragraph.

THE WITNESS: Since it is a drug that has never been legal in the United States, I really don't know. I have been told that it has three or such types of testosterone mixed together. In Southern California we had a problem with that in that a fellow who is not a chemist or physician or whatever but simply worked at a training gymnasium in Southern California was manufacturing a product he called Bolasterone in his kitchen. And even copied a reasonable looking label, was selling this on the black market. He is now in jail, I have been told.

10

15

And the difficulty there is that it wasn't these types of testosterone that came from Europe, he simply, from what I have been told and when I reported this to the food and drug administration, and they found that he was using Deca-Durabolin mixed with some sort of testosterone.

20

Well, Deca-Durabolin is the one anabolic steroid that could be detected for perhaps up to a year.

25

So, no one in their right mind would use Deca-Durabolin. And so my concern was that some athletes unknowingly might be caught on drug testing by using this product, but this fellow has been out of contact. He's been in jail for the last year.

MR. ARMSTRONG:

Q. And then you say in respect of Bolasterone, "Bolasterone became fashionable as a black market anabolic substance used by body builders some three to four years ago. In the last few weeks I have heard from a number of former Olympic track and field athletes who tell me that they and some of their colleagues have been buying this product from their black market agents."

So, that would have been information that you just obtained recently before writing this letter on March the 1st, '85?

A. Yes. If it is of interest, I could probably find the letter to Dr. Voy where I reported this to him, if it is necessary.

Q. That information about the former Olympic track and field athletes, would those be athletes that had competed in the prior games in Los Angeles in '84?

A. At least one.

THE COMMISSIONER: Just going back to page 6, at the bottom:

"In speaking of blocking agents, apparently one of the toxicologists during his lunch hour was talking about vinegar and garlic as a blocking agent."

Do you have that on page 6?

THE WITNESS: Yes.

THE COMMISSIONER: We have had something about vinegar and honey. Would that be of any use in --

THE WITNESS: This was actually sort of tongue and cheek, because Antabuse is a drug used with alcoholics.

THE COMMISSIONER: Right.

THE WITNESS: I mean you wouldn't want to reasonably block that because you are trying to stop the alcoholism.

THE COMMISSIONER: What about vinegar as a masking agent for drug testing?

THE WITNESS: Well, years ago one of the earlier attempts at confusing the testing was to use -- you see, the urine is supposed to be acid.

THE COMMISSIONER: Yes.

THE WITNESS: And athletes tended to use acid or alkaline products. One of the more common things was to simply put soap underneath the finger nails and

then you urinated, you urinated so that the urine ran through that it alkalized the urine. So that's why the Olympics now they have someone holding the cup for you. And I suppose vinegar could be used in the same context. If you throw off the pH, the acidity --

THE COMMISSIONER: Well, if you drink vinegar and some other compound, let's say honey or something just before a test, or shortly before a test, was that thought to somehow to be what we have been calling a masking agent?

THE WITNESS: Frankly, I never heard that before.

THE COMMISSIONER: I thought you said vinegar could be used instead of?

THE WITNESS: This was before.

THE COMMISSIONER: Just now -- pardon?

THE WITNESS: This was with Antabuse.

THE COMMISSIONER: I understand that you talked about somebody using soap on their hands.

THE WITNESS: As I say I suppose vinegar could be used that way. I don't know about ingesting it. I hate to think about drinking the stuff.

THE COMMISSIONER: All right.

MR. ARMSTRONG:

Q. Right. Then at page 7 in the second last paragraph, you say:

"The athletes speak of Italian cyclists as perhaps being the greatest offenders when it comes to the use of ergogenic drugs."

I wanted to ask you particularly about cycling in the middle eighties from the information that you had at that time. From your contacts as they were, leaving aside Italian cyclists, what was your information? What conclusions did you come to about the sport of cycling in particular so far as performance enhancing drug use is concerned?

A. I believe I knew three American cyclists and they seemed to be on -- at least from what they told me.

Q. Are these Olympic cyclists?

A. Yes. Relatively small amounts of one or two anabolic drugs. I think that they -- I have no idea whether they were telling me the truth or not, but apparently it's quite an endurance sport. And so everyone that has a story has a story about cyclists and about how the cyclist would be going around the track and won't even come to a complete stop, and his coach would run up and put a needle into his vein and inject something and then he keeps going without even stopping. And they tell me

around the track you could find old syringes all over the place.

So, everyone has stories seemingly about cyclists, particularly European cyclists.

5 Q. Leaving that aside, however, or not leaving that aside, but just about the sport generally, did you come to the conclusion that indeed the use of performance enhancing drugs and in particular anabolic steroids was significant in the middle eighties?

10 A. As I say, I only knew three cyclists.

Q. Yes?

15 A. And they certainly were taking anabolic drugs and had been taking anabolic drugs. And in correspondence with them, I believe they are still taking anabolic drugs. And they seem to imply that this was promoted by coaches.

20 Q. Now, as you have indicated on more than one time during the course of your evidence, you gave up the steroid practice about five years ago or so. And why was that?

25 A. Well, frankly, I was becoming old fashioned to them. I would have nothing to do with drugs that were not legal in the United States. And that was what they were turning to. Ten years ago even the body builders, who are obviously the greatest abusers of these

drugs, would use a couple of Dianabol tablets a day and maybe an Anavar tablet a day or something like that. And they were winning big contests. Now, the body builders tell me, that for instance one told me who was entering the Mr. Olympia, which is the biggest body building contest, he says you have to be on 15 to 18 different steroids. At least that's his opinion. And he was certainly -- that's what he told me, it was amazing. So, things have changed. And I wouldn't go along with that. And I am certain other doctors wouldn't go a long with that, besides the fact that we wouldn't discuss totally illegal like the Bolasterone.

Besides that, athletes were telling me -- in fact friends who were athletes were saying, you know, Bob, you have given me Anavar, I think you ought to know I have been going to a black market dealer, I am getting six other things besides that a little bit of Anavar, I thought you ought to know that. I heard that from four or five people that I knew quite well. And it was obvious that I wasn't keeping them away from black market activities.

I think it was quite obvious that certainly in the United States of all those athletes there is millions of athletes who were taking and taking anabolic drugs that very, very small percentage were going to

physicians. It was quite obvious. I have never known of a weight-training facility where steroids did not play a significant role. When I speak to some of these body builders, they tell me at their gym probably the
5 percentage is in the nineties of those taking black market steroids.

Well, I think if you go to just about any weight training facility in the United States or Canada I think you will find that that's the case.

10 I have known of NBC and other groups that have sent reporters to gyms and portrayed an athlete who wanted to be a little stronger and he was directed to the local black market dealer. And it is amazing how many millions and millions of people are doing that right now
15 in large amounts.

So, trying to convince these people not to do that, is of no avail, they will certainly not listen to you. And unless something drastic changes, I think it is always going to be that way.

20 Now, the law enforcement agencies now have been cracking down on some of major distributors. The athletes say when this fellow, this wholesaler that my dealing is going through, when he was arrested, four others took his place. Or he would go to Mexico, just
25 walk down there, any pharmacy, anything you want to buy.

We went down last year, I think it was, to get lobster down south of the Tijuana. So, we stopped in Tijuana on the way back. I think my wife and I stopped at four drug stores. Steroids played a prominent role in the main
5 showcase of drugs as you entered the place. They had combinations of things that even though I have been away from this for five years, I don't think anyone has ever heard of before, combinations of things that no one had of thought of combining. So, it seems to have escalated over
10 the years to ridiculous amounts, no question about it.

I have received letters from athletes and doctors from Canada who say it is the same thing here.

Q. Now --

THE COMMISSIONER: I am sorry, then the
15 question is why did you give it up.

THE WITNESS: Well, I was obviously doing no good trying to steer these people away from black market dealers. I had communication from doctors in the last year who still believe they can do it, but I think they
20 are being silly about this. It's just not the way people are.

MR. ARMSTRONG:

Q. Now, when you were involved in this
25 practice in San Gabriel up until five years ago, were

there any other doctors to your knowledge in San Gabriel, with again I am not asking for names, were there any other doctors in San Gabriel who were also involved in prescribing steroids at that time?

5 A. Four years ago I know of five other physicians who were writing prescriptions for steroids. In one case, the physician had been an athlete. In the other cases, I don't believe -- I would doubt that they even have watched athletics on television. I don't
10 believe they knew what they were doing. And San Gabriel is a small town 20,000, 25,000. Communications that I have had with physicians around the Los Angeles area, I think I have communicated with about 70 or more physicians who stated they were --

15 THE COMMISSIONER: What is the position now of the governing authority of the medical profession in California? Have they changed their -- I have told you what had happened in Canada?

20 THE WITNESS: I received a call a year and a half ago from a physician who is in Los Angeles who has been I think prescribing steroids longer than I have and probably to more people because his practice was just that. And he told me that he was still prescribing
25 steroids at that time, a year and a half ago and he had been --

THE COMMISSIONER: Say in Ontario we have what we call the College of Physicians and Surgeons which is the governing body of the medical profession. Is there a similar body in California?

5 THE WITNESS: Yes. He was notified at that time by the governing body, the Medical Board for the State of California, that they were going to take his licence away if he continued to do it because this was at least a year after the law went into effect. And he said
10 that he didn't know there was such a law. And he mentioned another physician --

THE COMMISSIONER: What law are you speaking of?

15 THE WITNESS: This is the California State Law in which they made it less -- available at the pharmacies.

THE COMMISSIONER: I see.

20 THE WITNESS: And I think the idea was to dissuade physicians from writing these prescriptions. I don't think they made it clear, obviously, to some physicians that was the case since there are some that are still writing today.

THE COMMISSIONER: All right.

25 MR. ARMSTRONG:

Q. Just going back to the evidence you were giving a moment ago, you say at the time, what, you knew four or five other physicians in San Gabriel who were prescribing steroids?

5 A. Athletes told me of four and it seemed to me that the fifth was also dispensing steroids one way or another.

Q. And these were doctors prescribing to athletes for athletic, performance-enhancing purposes?

10 A. The ones I heard of were all body builders or amateurs who were building up their body. There were no professional athletes.

Q. Then you were going to go to talk about the Los Angeles area, and you mentioned the figure 70?

15 A. There was at least 70 -- 72 as I recall that I had heard from over the years in the Los Angeles area. Obviously there are probably others that had no reason to communicate with me, so.

20 Q. Again these would be physicians who would -- who were prescribing steroids to athletes for the purposes of increasing athletic performance?

A. Yes.

25 Q. All right. Then just going back to your evidence a little earlier about the nature of your own practice and your knowledge of the scene generally, we

have heard it said here by more than one witness, in fact several witnesses now, that certainly in Canada and indeed in the United States and indeed internationally that there are certain track and field events, particularly the
5 throwing events where at the international level you don't compete unless you are taking steroids. Would your own information and experience suggest that that's the case?

A. Dr. Voy of the USOC has said that the only two events where these drugs have not been found to
10 play a role throughout the years has been women's field hockey and women's figure skating.

Obviously some sports require more strength and speed than others. And I would think that field eventers certainly would be more likely to take more
15 anabolic drugs than track or runners might. Actually we are kind of condemning runners and yet they probably take fewer drugs overall than many, many other sports.

Q. Well, let me ask you about sprinters at the international elite level. Does your information and
20 experience tell you that indeed the use, whether it is as high as the throwers or not is another question, but does your experience and information tell you that sprinters at the elite level are indeed using anabolic steroids and a significant number of them are using anabolic steroids?

25 A. Well, I have been away from it for a

number of years and I certainly can't give you a very accurate number. In 1984, in the Los Angeles Times, in about November they quoted one of our Olympiads who was a runner and he stated to his knowledge the Olympic people that were taking steroids numbered in the nineties.

Q. You mean 90 percent?

A. Yes. And I certainly have not heard --

THE COMMISSIONER: I am sorry, 90 percent or in numbers 90.

THE WITNESS: Ninety percent.

THE COMMISSIONER: Thank you.

THE WITNESS: I certainly don't have any knowledge that that has decreased. I would only assume -- my guess is only as good as yours, but I would only assume is it has escalated since that time.

MR. ARMSTRONG:

Q. When that kind of figure was put out in November 1984, if I can put it that way being put out, I assume that you would not based on your own information or experience found that to be a surprising figure?

A. In fact I can think of two women sprinters who have told me within the year in regard to the Ben Johnson situation that they weren't terribly surprised and that -- not regarding Ben Johnson, but in

regard to someone being found guilty. And they implied this could have happened to any of them. And they felt it was a naive situation with perhaps poor instruction that caused his downfall. And that they felt that they through
5 some means or another had better information and this would not happen to them. They implied this could happen to anyone.

THE COMMISSIONER: They were taking the drugs, though, but thought they would not be caught?

10 THE WITNESS: You know I think all the athletes have that feeling that they have the best information no matter where they got it. Usually it's from a coach or another athlete. They always feel that they are -- they might be a little apprehensive prior to
15 competition, but --

THE COMMISSIONER: You would discuss clearance times with your patients?

THE WITNESS: I am sorry.

20 THE COMMISSIONER: I gather you would discuss clearance times with your patients when you are administering the --

THE WITNESS: You know I really didn't want to get involved with that because my thought that if an athlete was disqualified because they had taken
25 something that I had not advised them on or more likely --

THE COMMISSIONER: No, I am talking about the drugs you are prescribing them. Would you not tell them of clearance times.

THE WITNESS: That's what I am saying, sir, is that I wouldn't do that because I didn't want them to be taking something that their coach gave them and have them flunk a test and then blame me. And frankly I don't think I know clearance times that well. I am not sure anyone does. There is a lot of guess work.

THE COMMISSIONER: Thank you.

MR. ARMSTRONG:

Q. When you say you were talking to these two female sprinters who said that quite frankly it could have happened to any of them including themselves, again without naming names, were these women Olympic-calibre athletes?

A. Yes.

Q. Then I wanted to -- well just one more question along this line. I recognize that you have stopped this practice, but certainly from what you have said this morning and what you have said just a moment ago, to some extent you have kept in touch. Presumably you have continued to have athletes as patients who provided you with information, is that not so?

5 A. Well, I don't -- they don't discuss it when they come in as they once did. I think they know I have been rather open with Dr. Voy of the Olympics in discussing things, not names particularly, but what drugs were coming out and being used and so forth. And so I think they are rather hesitant about telling me what they use. But, to a certain degree some of this information does come out, and they mention something now and then, but certainly not as it once was.

10 Q. You are still friendly with some of the officials and coaches who are close to the scene and you hear things from them from time to time?

A. That's true.

15 Q. And I suggest to you that the scope of the use of anabolic steroids that existed in '84, as you have described and indeed other witnesses have described here, has based on what information you have is in no way diminished in 1988-89?

A. I would assume that.

20 Q. Then there was a witness who testified here by the name of Angella Issajenko, and she in 1983 went to see you, and her name at that time was Angella Taylor. And you were kind enough to provide me with a copy of her office chart, is that so?

25 A. When she signed a release, of course.

Q. Yes.

A. This is privileged.

MR. ARMSTRONG: Yes. I am not going to
file, Mr. Commissioner, Ms. Issajenko's office chart, but
5 there is some information on it. All of this information
has in one form or another already found it's way on to
the public record and I think it might be helpful if we
had the benefit of Dr. Kerr just reading his note that
appeared on the chart when she was in his office on
10 October the 11, 1983.

Q. And would you just do that for us,
please, Dr. Kerr?

A. The first page is simply the patient
information with her address and all that business. My
notation is that she had a blood pressure of 110 over 70.
She stated that she trained at York University and she was
a 100 to 200 metre Canadian athlete.

She said that the other athletes both in
Canada and throughout the country or throughout the world
were taking ergogenic drugs and she felt she was going to
be left behind. She said she had experimented with
anabolic steroids. She had taken Dianabol and afterwards
had acne, and she had also used Winstrol, and I would only
assume that we're talking about the tablet form, and she
experienced some left flank pain following that.

She told me she didn't drink, didn't smoke.
She had tendonitis in February of the buttocks which she
described as a sciatica. She said her weight was 138 to
140 and her goal was 136.

I said in my chart that she should have her
blood pressure taken twice a week while she was on the
steroid program. I examined her heart and lungs and found
that to be normal.

She signed a release form that talks
about -- it's an information sheet that talks about

side-effects and all of that. I think it's probably on the record.

THE COMMISSIONER: Yes, we have a copy of that.

5 THE WITNESS: I suggested that she might take the human growth hormone, which was probably the most popular thing at that time. It became more popular as the year went on into '84. One cc twice a week which is a pretty small amount. She was to take that for six weeks.

10 Anavar twice a day along with amino acids arginine and ornithine, which along with the L-Dopa is thought to enhance the take up of growth hormone so she had a six-week supply.

THE COMMISSIONER: For six weeks?

15 THE WITNESS: Yes. She later phoned me in February, that was four months later, February the 10th, and said that she had had a hypoglycemic reaction to something or other. She said she would be taking STH again in the spring, and I advised her to only do it
20 through a physician's care and only for a very short period of time. The urine analysis is on that first sheet.

MR. ARMSTRONG:

25 Q. You had a urine analysis done of her

when she was there?

A. Yes. And further on back is the blood panel study that I undertook.

Q. And in the blood panel study that you
5 had done, were there -- was there -- did that include liver function studies?

A. It did.

Q. Then you, apart from whatever your record shows, you only saw her once and talked to her on
10 the telephone once, and I take it you don't have any independent recollection of having seen her, simply your recollection is confirmed by what is written down in the paper?

A. That's correct.

Q. Now, Dr. Kerr, you don't personally
15 know Ben Johnson?

A. No, I do not.

Q. And indeed it goes without saying from that question you have never met him?

A. No.

Q. And you don't know and have never met
20 Dr. Astaphan?

A. No.

Q. However in March of 1988 and
25 subsequently, you did have certain conversations with a

track coach friend of yours from western Europe who apparently provided you with some information concerning both Dr. Astaphan and Ben Johnson; is that so?

A. That's correct.

5 Q. And you were good enough some time ago when I first contacted you to provide me, as one of the Commission counsel, with that information?

A. That's right.

10 Q. And that information of course is all hearsay secondhand in that it comes from this European track coach to you?

A. That's correct.

15 Q. And I have explained both -- I've explained to Dr. Kerr, Mr. Commissioner, and it's my view that that information of course is hearsay, explained to Dr. Kerr, and I bring it to your attention, sir, that that information was put to Dr. Astaphan, the information that Dr. Kerr had given to me. I have put it to Dr. Astaphan in essence --

20 THE COMMISSIONER: It was a Dutch coach. You cross-examined him.

MR. ARMSTRONG: I put it to him in cross-examination and he denied it.

THE COMMISSIONER: Under oath.

25 MR. ARMSTRONG: And it's my view as

counsel, and I'm sure it's yours as Commissioner, that that's the end of the matter and I don't propose to --

THE COMMISSIONER: No, I would never act on hearsay on such an issue and we have Dr. Astaphan's sworn
5 denial of the conversation, which under our rules puts an end to it.

MR. ARMSTRONG:

Q. Fine, thank you. Those are all the
10 questions I have of you, Dr. Kerr. I believe one of the other counsel may have some questions of you.

THE COMMISSIONER: Mr. Pratt? Only for matters of clarification, Mr. Pratt.

MR. PRATT: Yes, I understand, sir.

15 THE COMMISSIONER: Not given any evidence which directly is adverse to your client.

MR. PRATT: For which I am quite grateful of course.

20 ---EXAMINATION BY MR. PRATT:

Q. My name is Allan Pratt, sir. I'm representing Charlie Francis in this matter.

I would like simply just to deal first of all with some loose ends arising out of your letter which
25 Mr. Armstrong has dwelt on in some length already, and

I'll try not to prolong it unnecessarily.

A. Which letter is that?

Q. I'm sorry. The letter to Dr. Lombardo and others dated March the 1st, 1985, Exhibit 204.

5 I note, sir, that you prefaced the substantive parts of the letter by indicating that you have not included rumours and unfounded statements and that the material in the letter had mostly been corroborated by others.

10 And I wonder if you could simply elaborate, without naming names, if you feel uncomfortable about it, about the types of people with whom you may have just talked about these matters and who may have corroborated the substance of this letter.

15 A. Physicians, coaches and athletes.

Q. Would these be mostly from the United States or from other countries as well?

A. Mostly from Europe.

THE COMMISSIONER: Pardon?

20 THE WITNESS: Mostly from Europe.

MR. PRATT:

Q. Would that include people from both sides of the Iron Curtain, sir?

25 A. There were a few, a couple from the

other side.

Q. From the east?

A. Yes.

Q. Now, you've attempted I think to place
5 anabolic steroids in some type of context, and you
mentioned a number of other types of techniques and
substances which also supplement performance, and perhaps
first of all, I wonder if you could clarify.

I noticed you used the term, sir, "anabolic
10 drugs". I wonder if you meant that to be anything other
than anabolic steroids?

A. I think "anabolic" would probably be
used with anabolic steroids. Ergogenic or
strength-enhancing drugs might include quite a variety of
15 things.

Q. And what might that include?

A. Do you want some examples?

Q. Yes, just to give us some idea of what
may be included as well as steroids.

20 THE COMMISSIONER: These are ergogenic, are
they?

THE WITNESS: In other words they might
have something to do with performance. In one way or
another, they might have something to do with -- well, for
25 instance, one thing that has been --

THE COMMISSIONER: But they're are not androgenic, as well then?

THE WITNESS: No, not androgenic. That's good that you mentioned that. For instance, neurotransmitters are something that has been popular since probably '86, and I gather that a great deal of experimentation has been done throughout the world on neurotransmitters, and this is a whole new line of drugs that could work on the central nervous system.

Deaner, for instance, D-E-A-N-E-R, has been around a long time. I remember hearing about that in medical school, something about it increasing your I.Q., though I --

THE COMMISSIONER: Pardon?

THE WITNESS: Pardon?

THE COMMISSIONER: What did you say? It increases --

THE WITNESS: The I.Q., intelligence quotient.

THE COMMISSIONER: What's the name of that?

THE WITNESS: My two classmates that took it, I don't recall, showed any great promise along that line, but I understand it's one drug that's being experimented with in Europe.

There is - she's going to hate me with these

names - Citidine, C-I-T-I-D-I-N-E, triphosphate,
T-R-I-P-H-O-S-P-H-A-T-E, - choline, C-H-O-L-I-N-E, from
Spain that I have been told increases speed. I have no
idea how it works.

5 The brand name is S-A-U-R-A-N, and one way
it works is through increasing blood flow to the brain. A
widely used drug Trinerbic, T-R-I-N-E-R-G-I-C, from India
I have been told is being widely used. I know nothing
about these products or I would tell you more.

10 At any rate, there are certainly more that
are being used.

 THE COMMISSIONER: I think that's enough
for your purpose.

15 MR. PRATT:

 Q. That's right. I was not going to
pursue that, sir. There was a passage on page 3 of your
letter, sir, that's in front of you relating to nerve gas.

 A. Yes.

20 Q. And I don't believe Mr. Armstrong read
it into the record. It may not be necessary, but --

 THE COMMISSIONER: What page?

 MR. PRATT:

25 Q. Page 3, sir, it's the third paragraph.

second complete paragraph.

And perhaps I can just read a few sentences of it.

"In regard to nerve gas, this product is based on the choline-esterase blocking capacity of anti-choline-esterase."

I hope I got that right.

"In this manner, choline-esterase cannot eliminate acetylcholine and the calcium ion liberation by the muscular endoplasmic reticulum is prolonged beyond normal physiological standards. It appears that it is used within minutes before competition much the same as the strychnine and, at this time, I do not have the data on the dosage but, I would doubt that any of you are going to rush off to your nearest Rexall Drug Store to buy some. It only points out the limits that some countries will go to to hopefully bring home gold medals."

I take it, sir, that your last statement is an indication that your belief -- well, let me ask a question.

Would this indicate your belief that this was something being done by the countries or by the individuals in the countries?

A. My informant didn't say whether the country was involved, but that it was eastern bloc countries and they were being used in powerlifting only.

Q. I see. All right, so we've -- would
5 this be a stimulant, sort of, just generally?

A. It actually blocks a blocking effect. And obviously if the drug doesn't wear off or an antidote given, obviously your muscles all over could stop working and you would stop breathing and so forth. And it just
10 shows the ridiculous degree that some people will go to --

Q. So in addition to the anabolic steroids, there are many, many other techniques and substances which have been used?

A. I would say that there are probably
15 more non-androgenic drugs being used than there are androgenic drugs being used.

Q. And I believe you indicated this morning, I suppose what's obvious, that the banned list by the International Olympic Committees or any other attempt
20 to ban the use of substances is always catching up to those who are attempting to push the envelope, so to speak?

A. Yes, throughout the years I've written rather extensively to Dr. Voy, when he was with the USOC,
25 to inform him of names and so forth of drugs that he might

not have encountered in this country, but you know, unless you get a lot of data and all, you really can't put it on the banned list but some of them were.

Q. I would like to direct you briefly,
5 sir, to a comment in about the middle of page 5 of that same letter, and it arises in relation to blood-doping, but I would particularly like you to draw your attention to the second sentence in the first complete paragraph in the middle of the page, and it reads as follows:

10 "I have just been reviewing a letter from one of these European physicians who stated that in his findings the eastern block coaches administered most of the ergogenic and anabolic steroids to the athletes as the
15 medical staff is too busy thinking about more efficient means of increasing performance possibilities and seeking newer and more explosive combinations, of course, all of them free from detection.'"

20 And that's the end of the quote.

A. Yes, that's quotation marks around it.

Q. So that I take it, sir, that your
information was that the medical endeavors in at least one eastern bloc country was directed not only to increasing
25 the performance enhancement factor but to actively evade

detection of these new substances?

A. Yes, I think we went over that earlier, that I have been told by a number of people about laboratories in eastern countries where this was their prime job, finding that.

I think perhaps Dr. Fred Hatfield I believe mentioned visiting one on a trip to eastern Europe, and somewhere I have the names of two or three just in and around Moscow. Now again, I don't know that these were state-supported. They might have just been individuals or a physician or a pathologist who was running these. I don't know about that.

Q. I see, but nonetheless, there appears to have been in your information a considerable number, a considerable amount of activity by the medical staff behind the iron curtain along these lines?

A. Well, you know, I don't know how it is today, but I think some countries used gold medals for bragging rights to third world countries, perhaps.

THE COMMISSIONER: For what? I'm sorry.

THE WITNESS: Bragging rights to show how superior they were as a race when maybe other countries were not as interested in that, in particular the western countries.

MR. PRATT:

Q. I see, sir, on page 6 of your letter, there is -- four complete paragraphs down, there is a reference, and I won't read it, to the claim by eastern
5 Europeans that the East Germans are given 60,000 DM. I assume that's Deutsch marks, is it?

A. Yes,

Q. For every medal won in competition which is placed in a bank account and can't be used until
10 the athlete retires. Do you have any elaboration upon that or is that --

A. Well, it's really not that much difference in the west. When you talk to some of these athletes, the quality athletes, they talk about money
15 that's given to them under the table.

THE COMMISSIONER: I'm sorry, I can't hear you.

THE WITNESS: I'm sorry. They mention money that is given to them under the table.

20 THE COMMISSIONER: Yes, but this is state-granted money. I think that's the difference. You're talking about the East Germans giving -- the state gives them the money.

25 THE WITNESS: That's true, yes. Otherwise it's a shoe company I suppose.

MR. PRATT:

Q. I guess finally before I leave this letter, I would like to draw your attention, sir, to the bottom of page 3 and the top of page 4. This is a passage
5 that I don't believe Mr. Armstrong referred to, and perhaps if I might, Mr. Commissioner, read that paragraph into the record and then ask for the doctor's comment --

THE COMMISSIONER: Well, the letter is part of the record.

10 MR. PRATT: Well perhaps then maybe I can summarize it so that the questions that I ask may have some coherence.

THE COMMISSIONER: This is an exhibit.

15 MR. PRATT:

Q. This paragraph - I'll try to summarize it, sir, - is to the effect that you met an individual at the airport and was asked about the Homer-Perkins apparatus and whether it was going to be used at the Los
20 Angeles Summer Olympic Games.

Apparently this person was concerned, and I'll perhaps take the liberty of reading one sentence:

"It was his contention that they --"
and I think this is the eastern bloc countries,

25 "-- were so afraid of sending their athletes

here to compete against an unknown
laboratory method that they simply were not
going to come for one reason or another."

As we all know, the eastern bloc countries didn't come to
the 1984 Los Angeles Summer Games.

Do you have any information as to whether or
not this fear might indeed have been a factor in that
boycott?

A. No, I don't. This was the first thing
he said to me when he arrived, and he was amazed when I
said that they were -- I said, I don't even know what a
Homer-Perkins machine is. I said, that's not what they're
using for testing.

And he said that an informant in some
federation in Europe had heard that this was what was
going to be used and they were unfamiliar with this
detection method, and there were a lot of frightened
people about it because they didn't know -- with other
methods they had an idea of how to beat the test, but they
didn't particularly know about this particular machine and
they were quite concerned, according to him.

Q. Since that discussion, have you made
any inquiries regarding this apparatus?

A. I talked to Dr. Catlin and I
particularly talked to Dr. Voy about it, and they knew

nothing about it either so they have no idea how this
rumour got started and was picked up by an --

THE COMMISSIONER: What is that
Homer-Perkins machine?

5 THE WITNESS: I don't know.

THE COMMISSIONER: I see.

MR. PRATT: There seems to be some
indication that it apparently tests saliva.

THE COMMISSIONER: That's what the letter
10 says.

MR. PRATT:

Q. But this is from the same question, I
should say. Would you be able, sir, to just finally to
15 give us some idea of the number of Olympic medalists who
you have treated as a doctor over the years?

A. You're talking about with steroids?

Q. With anabolic steroids in particular
and then perhaps in general.

20 A. You're talking about all three medals?

Q. All three medals; gold, silver and
bronze.

A. Well of course there are none obviously
in the Seoul Olympics, but I don't know. I suppose there
25 must have been 20 or so in the '84 Olympics.

Q. Would you be able to break that down to tell us approximately the number of track and field athletes?

THE COMMISSIONER: I don't think we have to do anymore than that.

MR. PRATT: Thank you, sir. Those are my questions.

THE COMMISSIONER: Thank you very much. Any other questions? Well, thank you very much, Dr. Kerr. We are doing the best we can to learn as much as we can find out about the international scene, not just our scene in Canada, and you have got a broad knowledge of the American problems and a great context throughout the world, and we are much indebted to you for coming here to give us the benefit of your experience. Thank you very much.

THE WITNESS: Could I say that, you know, when Mr. Johnson was disqualified and later there was a mention of an American plot to disqualify him, sabotage him, you know, I never talked to an athlete or an American of any sort who wasn't as terribly hurt at the fact that he was disqualified.

I think we felt almost as terrible as you did. I don't think that there was anyone, I know of no one who was sorry that he did not -- or that the medal

went on to Carl Lewis. I think that everyone was hoping it was a mistake and that Mr. Johnson would end up with the title and all of that.

THE COMMISSIONER: Thank you very much.

5

THE WITNESS: Thank you, sir.

THE COMMISSIONER: Mr. Armstrong that's all the witness you have for today I think?

MR. ARMSTRONG: Yes, that's it for today, but as you would say, we as counsel, and I'm sure you as Commissioner, will be able to fully occupy yourself.

10

THE COMMISSIONER: Tomorrow morning at ten o'clock. Thank you very much.

15

---Whereupon the proceedings were adjourned to Tuesday, June 20, 1989, at ten o'clock.

20

25

